PTO/SB/122 (05-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
a collection of information unless it displays a valid OMP control with Ander the Paperwork Reduction Act of 1995, no persons are required to resp

## **CHANGE OF CORRESPONDENCE ADDRESS Application**

Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.

reported to a contestion of information unless it displays a valid OMB control number.								
Application Number	09/470,667	$\langle \ \langle \ \rangle$						
Filing Date	December 22, 1999							
First Named Inventor	Akira Asakura RECE	VE						
Art Unit	1652	) 1 20'						
Examiner Name	M. Walicka MAY 3	) <u>/</u> U						
Attorney Docket Number	13735 US1 (C38435/109790)	R 16						

						TECHUL	<u></u>			
Please change the Corre	spondence Address for the above-ident	ified p	oatent to	0:						
Customer Number		·			•	Place Customer Number Bar Code Label here				
OR										
Firm or Individual Name	BRYAN CAVE LLP									
Address	1290 AVENUE OF THE AMERICAS, 33RD FLOOR									
Address							=			
City	NEW YORK	Sta	ıte	NEW YORK	Zip	10104	-			
Country										
Telephone	(212) 541-2000	,	Fax	(212) 541-4	630	CE	AED			
Telephone  (212) 541-2000  This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).  I am the:  Applicant/Inventor  Assignee of record of the entire interest.										
Applicant/Inventor  Assignee of record of the entire interest. Statement under 37 CFR 3.7(b) is enclosed. (Form PTO/SB/96).						ER 1600/2900				
Attorney or A	Agent of record.	nsmitta	al letter	in an application	without a	n				
Typed or Printed	th or declaration. See 37 CFR 1.33(a)(1 HOOPER, REG. NO. 40,402	). Reg	gistratio ———	on Number		_				
Signature	fra									
Date May 20	2,2003		ephone		2000		1			
NOTE: Signatures of all the inventors forms if more than one signature is re	or assignees of record of the entire interest of equired, see below*.	or their	represe	entative(s) are require	ed. Submit	multiple				
*Total of 1 fo	rms are submitted.						╡			

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.